

# **MENTAL HEALTH CODING SCENARIOS**

 Joe, a 43-year-old male, is currently receiving treatment for alcohol dependence. As a result of Joe's drinking he is also on medication for chronic alcoholic gastritis. He also has a history of cocaine dependence. What diagnosis codes are assigned?

# Answer:

F10.20- Dependence, (on) (syndrome), alcohol (ethyl) (methyl) (without remission) K29.20- Gastritis (simple), alcoholic

F14.21- History, personal (of), drug dependence – see Dependence, drug, by type, in remission. Dependence, (on) (syndrome), drug, cocaine, in remission

# Rationale:

The cocaine dependence is coded as "in remission" because there is not a history code for drug dependence.

2. Male patient had been seeing his primary care physician for anxiety and depression since 2001. The patient became increasingly depressed and began isolating himself and staying in bed on his days off. The patient has depressive symptoms of crying, insomnia, anorexia with recent 20-pound weight loss, decreased concentration, psychomotor retardation, and suicidal ideation with plan. In addition, the patient has auditory hallucinations and hears vague voices talking to him. He will sometimes hear his wife call him when she is not present. At the present time, the patient has been taking Wellbutrin 150 milligrams daily, Lexapro 20 milligrams daily, and Xanax 1 milligram three times a day. He also uses a Combivent inhaler. He has been to the emergency room on several occasions for panic and anxiety attacks and he was treated symptomatically and released. What diagnosis codes are assigned?

# Answer:

F33.3- Major Depressive disorder, recurrent, severe with psychotic symptoms R45.851- Suicidal ideations F41.0- Panic disorder [episodic paroxysmal anxiety] without agoraphobia

# Rationale:

In ICD-10-CM, codes for depressive disorders are broken down by type of depression (major, organic, etc.), temporal factors (recurrent or single), severity (mild, moderate, or severe), and any associated symptoms or manifestations (psychotic symptoms). In our example above, the patient has a major depressive disorder with psychotic features. Because depression codes are

combination codes, we can report the code F33.3 that reports the type, temporal factors, verity, and the associated symptoms. This patient also suffers from related co-morbid conditions which should also be reported.

3. This young man is seen for continued follow-up for treatment of his dependence on amphetamines. What diagnosis cod(s) are assigned?

# Answer:

F15.20- Dependence (on) (syndrome), amphetamine(s) (type), see Dependence, drug, stimulant, NEC

#### Rationale:

ICD-10-CM classifies each drug by its type. If intoxication with the dependence is documented, an additional digit would be added.

4. How would you code alcohol abuse with intoxication?

#### Answer:

F10.129 Abuse, alcohol (non-dependent), with, intoxication

# Rationale:

ICD-10-CM does not specify the severity of alcohol use as previously seen in ICD-9-CM. If alcohol dependence was documented, the coding would go to F10.2.

5. This 25-year-old male presents to the clinic requesting assistance for cessation of chewing tobacco use. He has been a chronic user of chewing tobacco since age 13 and is now motivated to quit. Counseling on the options for chewing tobacco cessation was provided to the patient.

# Diagnosis:

Counseling for cessation of tobacco dependence.

# Answer:

Z71.6- Counseling (for), tobacco use

F17.220- Dependence, (on) (syndrome), nicotine, see Dependence, drug, nicotine. Dependence, drug, nicotine, chewing tobacco

# Rationale:

In ICD-10-CM, nicotine dependence is further specified by the type of product used. There is a note at code Z71.6: Use additional code for nicotine dependence (F17.-).